

## Divisional Application Transmittal Form

<b>UTILITY PATENT APPLICATION TRANSMITTAL</b>  (Only for new nonprovisional applications under 37 CFR 1.53(b))	Attorney Docket No. <b>AMN-005-004</b>		Total Pages			
	First named Inventor or Application Identifier				Shozo KOYAMA	
	Title of Invention		INHIBITORY OR BLOCKING AGENTS OF MOLECULAR GENERATING AND/OR INDUCING FUNCTIONS			
<b>APPLICATION ELEMENTS</b> See MPEP chapter 600 concerning utility patent application contents.				ADDRESS TO: Commissioner for Patents Box Patent Application Alexandria, VA 22313-1450		
1. <input checked="" type="checkbox"/> Fee Transmittal Form 2. <input checked="" type="checkbox"/> Specification [Total Pages <u>200</u> ] - Descriptive title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R & D - Reference to Microfiche Appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 3. <input checked="" type="checkbox"/> Formal Drawings (35 USC 113) [Total Sheets <u>38</u> ] 4. <input checked="" type="checkbox"/> Oath or Declaration [Total pages <u>2</u> ] a. <input type="checkbox"/> Newly executed (original or copy) b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 17 completed) [Note Box 5 below] i. <input type="checkbox"/> <u>DELETION OF INVENTOR(S)</u> Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 5. <input checked="" type="checkbox"/> Incorporation By Reference (useable if Box 4b is checked) The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.				6. <input type="checkbox"/> Microfiche Computer Program (Appendix) 7. <input checked="" type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. <input checked="" type="checkbox"/> Computer Readable Copy b. <input checked="" type="checkbox"/> Paper Copy (identical to computer copy) c. <input checked="" type="checkbox"/> Statement verifying identity of above copies  <b>ACCOMPANYING APPLICATION PARTS</b> 8. <input type="checkbox"/> Assignment papers (cover sheet & document(s)) 9. <input type="checkbox"/> 37 CFR 3.73(b) Statement (When there is an assignee) <input type="checkbox"/> Power of Attorney 10. <input type="checkbox"/> English Translation Document (if applicable) 11. <input type="checkbox"/> Information Disclosure Statement (IDS) /PTO-1449 <input type="checkbox"/> Copies of IDS Citations (* docs) 12. <input checked="" type="checkbox"/> Preliminary Amendment 13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) 14. <input checked="" type="checkbox"/> Assertion to Entitlement to Small Entity Status <input checked="" type="checkbox"/> Assertion filed in prior application, status still proper and desired 15. <input checked="" type="checkbox"/> Certified Copy of Priority Document(s) <input checked="" type="checkbox"/> Priority of application No. 6-252660 filed on September 9, 1994, in Japan is claimed under 35 USC 119. <input checked="" type="checkbox"/> The certified copy has been filed in prior application Serial No. 08/813,842 16. <input type="checkbox"/> Other: <input type="checkbox"/> Copy of Notice of Recordation of Assignment Document <input type="checkbox"/> Request for Change of Corresponding Address		
17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information: <input type="checkbox"/> Continuation <input checked="" type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in part (CIP) <div style="text-align: right;">of prior application No.: <u>10/029,259</u></div>						
<b>18. CORRESPONDENCE ADDRESS</b>						
<input checked="" type="checkbox"/> Customer Number or Bar Code Label <u>20374</u> or <input type="checkbox"/> Correspondence address below						
NAME		KUBOVCIK & KUBOVCIK				
ADDRESS		900 17th Street, N.W.				
CITY	Washington	STATE	DC	ZIP CODE	20006	
FILING DATE	November 24, 2003	TEL	202-887-9023	FAX	202-887-9093	

 17497 U.S.PTO  
 10/7/1854


112403

15750 U.S. PTO

**FEE TRANSMITTAL**

Note: Effective January 1, 2003

Application Number	Not Assigned
Filing Date	November 24, 2003
First Named Inventor	Shozo KOYAMA
Group Art Unit	Not Assigned
Examiner Name	Not Assigned
Attorney Docket Number	AMN-005-004


CLAIMS AS FILED-PART 1			SMALL ENTITY		OTHER THAN SMALL ENTITY	
FOR	NUMBER FILED	NUMBER EXTRA	RATE	FEE	RATE	FEE
BASIC FEE (37 CFR 1.16 (a))				\$385.00		\$770.00
TOTAL CLAIMS (37 CFR 1.16 (c))	22 - 20 =	2	\$9.00	\$18.00	\$18.00	
INDEPENDENT CLAIMS (37 CFR 1.16 (B))	1 - 3 =		\$43.00		\$86.00	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16 (d))			\$145.00		\$290.00	
			SUB TOTAL	\$403.00	SUB TOTAL	
SURCHARGE-LATE FILING FEE OR DECLARATION			\$65.00		\$130.00	
RECORDING ASSIGNMENT			\$40.00		\$40.00	
TOTAL				\$403.00		

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2. ☒ Payment Enclosed:☒ Check (# 5743 for \$ 403.00)☐ Money Order☐ Other**SIGNATURE OF ATTORNEY, OR AGENT**

NAME	Keiko Tanaka Kubovcik	REGISTRATION No.	40,428
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